



3970 Maryville Rd
Granite City, IL 62040
(618) 797-7993
Lost or Stolen Card?
Call (800) 523-4175

MasterCard Unauthorized Fraud

Cardholder Name: _____ Cardholder Phone # _____

Cardholder Address: _____

MasterCard Number: _____ GCS Account # _____

Transaction Information:

Merchant Name	Dollar Amount	Date Posted to Account

Required Information:

I am disputing the above charges due to the following reason (check only one reason):

I have not authorized or participated in this transaction in any way. My card has been out of my possession.

I have not, nor has anyone authorized by me, engaged in this transaction.

My card was lost on (date) _____ My card was stolen on (date) _____

I have participated in one transaction at the merchant location, but NOT the transaction listed. I, or someone authorized by me, was in possession and control of all cards at the time of the transaction. The authorized transaction amount was \$ _____ on (date) _____

Transaction Resolution Information: Card in member's possession: _____ Member contacted merchant: _____

Explanation in Cardholder's Words: (Merchant Comments, Transaction Details, etc.)

I understand that any credit given to me is a provisional credit, subject to Mastercard regulations and can be taken back up to 120 days from the time GCS files the dispute on the member's behalf. If warranted, by signing below you release GCS Credit Union to share information from this electronic transaction error report with local, state, and/or federal law enforcement agencies for further investigation.

Cardholder Signature: _____ Date: _____

